

<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b>  <b>Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</b>	<b>Application Number</b>	<b>09/997,974</b>
	<b>Filing Date</b>	<b>November 30, 2001</b>
	<b>First Named Inventor</b>	<b>Daniela Salvemini</b>
	<b>Art Unit</b>	<b>1623</b>
	<b>Examiner Name</b>	<b>Kathleen Kahler Fonda</b>
	<b>Attorney Docket No.</b>	<b>60019610-0235</b>

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

<b>1. Submission required under 37 CFR 1.114</b>	
a. <input type="checkbox"/> Previously submitted	
i. <input type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____ (Any unentered amendment(s) referred to above will be entered).	
ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____	
iii. <input type="checkbox"/> Other _____	
b. <input checked="" type="checkbox"/> Enclosed	
i. <input checked="" type="checkbox"/> Amendment/Reply	iii. <input type="checkbox"/> Information Disclosure Statement (IDS)
ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)	iv. <input type="checkbox"/> Other _____
<b>2. Miscellaneous</b>	
a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)	
b. <input type="checkbox"/> Other _____	
<b>3. Fees</b> The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.	
a. <input checked="" type="checkbox"/> In connection with this application, the Commissioner is hereby authorized to credit overpayments or to charge any additional fee required to Deposit Account No. <u>19-3140</u> . <b>A duplicate copy of this sheet is enclosed.</b>	
i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e) (\$770.00)	
ii. <input checked="" type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17) (\$950.00)	
iii. <input type="checkbox"/> Other _____	
b. <input checked="" type="checkbox"/> The enclosed credit card payment form in the amount of \$1,720.00 covers the total claim fee and other applicable fees.	
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>	
14. <input type="checkbox"/> Customer No. 26263	
Dated: <u>January 15, 2004</u>	<u>Kevin W. Buckley</u> Kevin W. Buckley, (Registration No. 45,801)
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b>	
I hereby certify that this correspondence is being submitted via facsimile (1.703.872.9308) to the U.S. Patent and Trademark Office on the date shown below..	
<b>Name (Print/Type)</b>	Kevin W. Buckley
<b>Signature</b>	<u>Kevin W. Buckley</u>
<b>Date</b>	January 15, 2004

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## Facsimile Transmittal Sheet

DATE January 15, 2004

PLEASE DELIVER THE FOLLOWING PAGES TO:

NAME Examiner Kathleen Kohler Fonda

FAX 703.872.9306

CLIENT/MATTER 60019610-0235

FROM Kevin W. Buckley

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*K.W. Buckley*

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Kevin W. Buckley

Date

Type of Paper transmitted: Request for Continued Examination and Amendment and Response to Office Action Under 27 C.F.R. § 1.116

Applicant's Name: Daniela Salvemini

Serial No. (Control No.): 09/997,974

Examiner: Kathleen Kohler Fonda

Filing Date November 30, 2001

Art Unit: 1623

Application Title: SODM THERAPY FOR PREVENTION AND/OR TREATMENT OF INFLAMMATORY DISEASE

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